

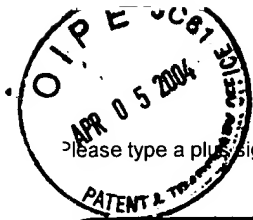
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	09/735,434	
		December 12, 2000	
	First Named Inventor	JASON HALLFORD	
	Group Art Unit	2124	
	Examiner Name	SHRADER, L. J.	
Total Number of Pages in This Submission	26	Attorney Docket Number	042390.P9918

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">POSTCARD Check # 15063 for \$870.00 RECEIVED APR 08 2004 Technology Center 2100</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 1, 2004

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:			
Typed or printed name	Paul A. Mendonsa		
Signature		Date	4/1/04



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PTO/SB/17 (12/99)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 870.00

Complete if Known

Application No. 09/735,434
December 12, 2000
First Named Inventor JASON HALLFORD
Examiner Name SHRADER, L. J.
Group/Art Unit 2124
Attorney Docket Number 042390.P9918

RECEIVED

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees to:
☐ The Commissioner is hereby authorized to credit any over payments to:

Deposit
Account
Number

02-2666

Deposit
Account
Name

Blakely, Sokoloff, Taylor & Zafman LLP

☒ Charge Any Additional Fees Required Under 37
CFR §§ 1.16, 1.17, 1.18 and 1.20.

2. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	690	345	Utility filing fee	
106	206	310	155	Design filing fee	
107	207	480	240	Plant filing fee	
108	208	690	345	Reissue filing fee	
114	214	150	75	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid

**or number previously paid, if greater. For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
103	203	18	9	Claims in excess of 20
102	202	78	39	Independent claims in excess of 3
104	204	260	130	Multiple Dependent claim, if not paid
109	209	78	39	**Reissue independent claims over original patent
110	210	18	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

FEE CALCULATION (continued)

3. ADDITIONAL FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet.	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for reexamination	
112	112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for response within first month	
116	216	380	190	Extension for response within second month	
117	217	870	435	Extension for response within third month	870.00
118	218	1,210	680	Extension for response within fourth month	
128	228	1,850	925	Extension for response within fifth month	
119	219	300	150	Notice of Appeal	
120	220	300	150	Filing a brief in support of an appeal	
121	221	260	130	Request for oral hearing	
138	138	1,510	1510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,210	605	Petition to revive - unintentional	
142	242	1,210	605	Utility issue fee (or reissue)	
143	243	430	215	Design issue fee	
144	244	580	290	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	50	50	Petitions related to provisional applications	
126	126	240	240	Submission of Information Disclosure Stmt	
581	581	40	40	Recording each patent assignment per property (times number of properties)	
146	246	790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	249	790	395	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)					
Other fee (specify)					

* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 870.00)

SUBMITTED BY

Typed or Printed Name Paul A. Mendonsa

Signature

Paul A. Mendonsa

Date

04/01/2004

Complete (if applicable)

Reg. Number 42,879

Deposit Account User ID

02-2666

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